The information below is provided in support of the indicated candidate and position as officer of the ASQ Healthcare Division for January 1, 2026 through December 31, 2027. By submitting this petition, I acknowledge that I am a Regular Member of ASQ and the Healthcare Division (HCD) in good standing as of the submission date. I understand that this petition form will be combined with others to meet the requirements associated with the technical community officer nomination process, which has a minimum requirement of 10 petitions. Regular Members are voting members of the Society and technical community—Professional, Senior, Fellow, Honorary, and primary contact of organization memberships.

|  |  |
| --- | --- |
| Submission Date |  |
| Nominee Name |  |
| Nominee Position |  |
| Nominee ASQ Member Number |  |
| Supporting Healthcare Division Member Name |  |
| Supporting Healthcare Division Member Electronic Signature (or Approximation) |   |
| Supporting HCD Member ASQ Member Number |  |

**Return this petition form to Rowena Chona Sano at** **chona.sano@gmail.com****. Please include “Nomination” in the subject line.**